



NARAL
Pro-Choice Montana

February 21, 2007

Chairman Stoker, Members of the Committee,

For the record, my name is Allyson Hagen, and I am the director of NARAL Pro-Choice Montana Foundation.

I stand in strong support of HB 612.

There are few things that would do more to prevent unintended pregnancies and STDs in Montana than this bill. It's the kind of common ground, common sense measure that people from both sides of the aisle can support.

In fact, poll after poll of Americans shows broad public support for sex education programs. In a recent article published in the Archives of Pediatrics and Adolescent Medicine 82% of those surveyed supported programs that teach students about both abstinence and other methods of preventing pregnancy and STDs. Conservatives, liberals, and moderates all support this type of sex education program including: 70% of conservatives, 86% of moderates, and 92% of liberals.

It is a rare opportunity where we can find such widespread agreement from people of varying political ideologies.

Montana teens deserve access to information that will allow them to lead healthy lives and make responsible decisions.

In the era of HIV/AIDS, we're not just talking about unintended pregnancies--we're talking about saving the lives of our young people. Let's not send our teens out into the world without the protection and information they need.

Please support this measure.

ARTICLE

Public Opinion on Sex Education in US Schools

Amy Bleakley, PhD, MPH; Michael Hennessy, PhD, MPH; Martin Fishbein, PhD

Objective: To examine US public opinion on sex education in schools to determine how the public's preferences align with those of policymakers and research scientists.

Design: Cross-sectional survey.

Setting: July 2005 through January 2006.

Participants: Randomly selected nationally representative sample of US adults aged 18 to 83 years (N=1096).

Main Outcome Measures: Support for 3 different types of sex education in schools: abstinence only, comprehensive sex education, and condom instruction.

Results: Approximately 82% of respondents indicated support for programs that teach students about both abstinence and other methods of preventing pregnancy and

sexually transmitted diseases. Similarly, 68.5% supported teaching how to properly use condoms. Abstinence-only education programs, in contrast, received the lowest levels of support (36%) and the highest level of opposition (about 50%) across the 3 program options. Self-identified conservative, liberal, and moderate respondents all supported abstinence-plus programs, although the extent of support varied significantly.

Conclusions: Our results indicate that US adults, regardless of political ideology, favor a more balanced approach to sex education compared with the abstinence-only programs funded by the federal government. In summary, abstinence-only programs, while a priority of the federal government, are supported by neither a majority of the public nor the scientific community.

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important component to the public health goal of promoting safe behaviors and preventing additional infections and unintended pregnancies.

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At the core of the federal government's response to sexual activity and HIV rates among youth is abstinence-only education. Federal focus on the promotion of marriage (ie, premarital course) as a standard for sexual activity is few. Comprehensive abstinence-only programs are cited for the lack of effectiveness in general, which research on se-

THE SOCIAL MERITS AND PRACTICAL efficacy of sex education in schools generate considerable debate among public health professionals and government officials. The choice of appropriate and effective sex education policies is critical, as human immunodeficiency virus (HIV) infection and AIDS increased by 10% from 2000 to 2003 among 15- to 24-year-olds in the United States.¹ In addition, this age group acquires half of all new sexually transmitted disease (STD) infections, but represents only about 25% of the sexually active population.² Direct medical costs associated with the 9 million STD infections, including HIV, among this age group in 2000 were estimated at \$6.5 billion, which is likely an underestimate.³ Although teen pregnancy, birth, and abortion rates declined in recent years, rates in the United States are persistently higher compared with other developed countries.^{1,4,5} Epidemiological data suggest that by age 25, 1% of youth have had sex, and this figure increases to 46.9% and 68.5% by ages 25 and 29, respectively.

POLICY

Three measures assessed public opinion in schools by using a 5-point scale to oppose to strongly support. The different type of sex education: abstinence-only (ie, comprehensive sex education), which includes condom instruction, as follows: "Do you support or oppose abstinence-only education in schools in your community that promotes preventing pregnancy and sexually transmitted disease and does not teach students about sex or oppose sex education programs that teach students about preventing pregnancy?"

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Originally articulated in Section 510 of Title V of the Social Security Act of 1996,⁶ and highlighted in a recent review of abstinence policies by Santelli and colleagues,⁷ abstinence education is a program which:

1. as its exclusive purpose, teaches the social, psychological, and health gains to be realized by abstaining from sexual activity;
2. teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children;
3. teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, STDs, and other associated health problems;
4. teaches that a mutually faithful, monogamous relationship in the context of marriage is the expected standard of human sexual activity;
5. teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, STDs, and other associated health problems.

a "prejudice" against messages that only abstinence intervention demonstrates a delay in sex in the short term, but those who practice other reproductive behaviors

- 81% of registered voters in South Carolina support sexuality education containing information on contraception and abstinence.¹⁰

Americans strongly support including a wide breadth of topics in sexuality education:¹¹

- 100% of parents of junior high school students and 99% of parents of high school students believe HIV/AIDS is an appropriate topic for sexuality education programs in schools.
- 100% of parents of junior high school students and 98% of parents of high school students believe sexually transmitted diseases other than HIV/AIDS, such as Herpes, are appropriate topics for sexuality education programs in schools.
- 99% of parents of junior high school students and 97% of parents of high school students believe basics of how babies are made, pregnancy, and birth are appropriate topics for sexuality education programs in schools.
- 97% of parents of junior high school students and 96% of parents of high school students believe information on how to get tested for HIV and other sexually transmitted diseases is an appropriate topic for sexuality education programs in schools.
- 80% of parents of junior high school students and 73% of parents of high school students believe homosexuality and sexual orientation are appropriate topics for sexuality education programs in schools.
- 71% of parents of junior high school students and 73% of parents of high school students believe informing teens that they can obtain birth control pills from family planning clinics and doctors without permission from a parent is an appropriate topic for sexuality education programs in schools.

Broad public support for comprehensive sexuality curricula is found across ideological and religious lines:

- Over four in five anti-choice voters agree that students should receive age-appropriate, medically accurate sexuality education, beginning in the early grades and continuing through 12th grade.¹²
- Almost nine in ten self-described Evangelical or born-again Christians support sexuality education being taught in schools.¹³

12 faith-based organizations are members of the National Coalition to Support Sexually Responsible Education, the American Jewish Congress, the Office of Family Ministries and Human Resources of the United Methodist Church, the Unitarian Universalist Association, and the Episcopal Church. (See the full list of over 140 supporting organizations at www.nationalcoalitiontosexuallyresponsible.org.)